PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/170680

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS / 2 minus 20				ıs 20=	*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 7 minus			us 3 =	*			X40=		OR	X80=			
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, ente					r "0" in co	olumn 2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PAR (Column 1) (Column 1)						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
IDM	Total		Minus=			=		_X\$_9 <u>=</u>		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=	-	OR	X80=	· · · · ·	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	IT CLAIM	L]	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Coli	urnn 2)	(Column 3)		ADDII. FEE		4	ADDIT: I CL		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	-	NU PREV	AHEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOZ	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
MEI	Independent	*	Minus	***	17 OL AUA	=	1	X40=		OR	X80=	•	
F	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDER	NI CLAIM		j .	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
	(Column 1) (Colu					(Column 3		ADDIT. I EL		_	ADDIT: TEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIC NU PRE\	HEST IMBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=		
WE	Independent	<u> -</u>	Minus	***	N.T. O. A.N.	=	4	X40=		OR	X80=		
	FIRST PRESE	ENTATION OF N	MULTIPLE DE	PENDE	NT CLAIM		<u></u>	+135=		OR		<u> </u>	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												